

Surviving while Serving the COVID 19 Pandemic: Addressing the Mental Health Needs of Social Workers and Mental Health Practitioners in the Philippines

Background and Rationale

It was March 13, 2020, when a COVID-19 lockdown was announced in the area where I live in the United States. Mixed feelings permeated my being as I managed to teach the last face-to-face session of my Master of Social Work class that morning. My students, colleagues, and I said our goodbyes as if we would see each other in a couple of weeks or so. But this was far from what would become our pandemic reality. As social distancing, use of masks, and handwashing became critical mitigations, the effects of social inequality and structural racism, as well as lack of access to such essentials as toilet paper, hand sanitizer, water, technology, and safe spaces for social distancing, became quiet but unremitting determinants of life or death. Some of my students live in small one-bedroom apartments, have limited or no internet access to hastily-implemented teaching modalities, and/or rely on tenuous part-time employment to augment their educational loans. These social work students became *victims* as they are not involved in the hierarchy of pandemic management.

Self-introspection took me to my country of origin—the Philippines, a distant archipelago of 7,641 islands with a total of 115,831 square miles, about 1.4 times smaller than the U.S. state of California but with three times more population (106.7 million, 2018). If so many of my American students were struggling, I wondered, *How could social workers in the Philippines effectively provide services during this pandemic, when more than 16% of the population lives below the poverty line.* The social and economic inequalities are heightened by a lack of basic access to necessities to survive the pandemic on top of the perpetual structural poverty affecting disadvantaged individuals, groups, and communities. This question led me to a consideration of pandemic survival and operation for applicable social work professionals.

The invitation to talk about self-care amongst Filipino social workers became a shared national conversation of members of the [Philippine Association of Social Workers, Inc. \(PASWI\)](#). On June 13, 2020 (Manila), I presented the topic, *Surviving while Serving the COVID 19 Pandemic: Addressing the Mental Health Needs of Social Workers and Mental Health Practitioners in the Philippines*. The live webinar was attended by more than 600 social workers and had at least 3,000 views on PASWI, Manila Chapter's Facebook page.

The significance of the culture of self-care in practice professions such as social work and psychology is embedded in student education, training, and supervision. The stakes are

high in establishing fidelity to professional practice and cultural competence because social workers serve individuals, groups, organizations, and communities who are inevitably challenged with biopsychosocial and spiritual needs. The [National Association of Social Workers](#) of the United States and the [International Federation of Social Workers](#) have laid out provisions for the most basic tenets of ethical principles of self-care, such that doing *no more harm* (Marks, Lamb, & Tzioumi, 2009) has become the gold standard of professional relationship and wellness. At the time of this writing, I am assisting the national organization in writing and incorporating robust statements on self-care within the context of the Philippine Social Work Code of Ethics.

There are several implications for understanding the culture of self-care for Filipino social workers. Traditional Philippine values of high expectation for achievement, respect for professional education, perseverance, and hard work (Schwartz & Bardi, 2001) are motivating factors for successful professional practice; but they can also be detrimental to self-care for personal needs. Likewise, these cultural values reinforce a collectivist attitude in the Filipino family and encourage group decision-making that preserves harmony or *pakikisama* as well as obedience to the hierarchy (Alora & Lumitao, 2001) as opposed to the Western value of treating a person as “autonomous, independent...to do what he chooses” (Ahn, 1975, p. 7). Duckworth’s (2016) characterization of grit as passion and persistence toward achievement, while extremely valuable in navigating personal, social, and professional success, can be damaging for social workers who fail to appreciate the value of moderation and the importance of physical and mental equilibrium.

While every pandemic meets its end, social workers need not wait for COVID-19 to expire. Rather, social workers must recognize and capitalize on opportunities to practice and promote self-care for the individuals, families, and communities they support. As experienced mental health practitioners and problem solvers, moreover, social workers are called to function as they do when natural and human-made disasters of any kind strike—by self-administering and teaching clients to cope and thrive via an astute application of proven interventions that promote a return to normalcy.

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References

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